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PTO/SB/01 (10-00)

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

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Declaration Submitted With Initial Filing       Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	4622-122US
First Named Inventor	Ladouceur, Dave
<b>COMPLETE IF KNOWN</b>	
Application Number	09/909,500
Filing Date	July 20, 2001
Group Art Unit	2166
Examiner Name	TBA

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Integrated Management of Medical Information**

the specification of which *(Title of the Invention)*

is attached hereto

OR

was filed on (MM/DD/YYYY) **July 20, 2001** as United States Application Number or PCT International

Application Number **09/909,500** and was amended on (MM/DD/YYYY) \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

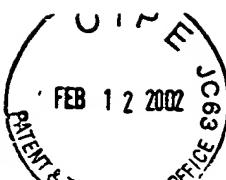
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

ApplicationNumber(s)	Filing Date (MM/DD/YYYY)	
60/219,484	July 20, 2000	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/219,523	July 20, 2000	
60/219,535	July 20, 2000	
60/219,572	July 20, 2000	
60/219,739	July 20, 2000	
60/219,744	July 20, 2000	
60/219,873	July 20, 2000	

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	<input type="text"/>	OR	<input checked="" type="checkbox"/> Correspondence address below
Name	David P. Krivoshik				
Address	Mathews, Collins, Shepherd & Gould, P.A.				
Address	100 Thanet Circle, Suite 306				
City Princeton	State NJ		ZIP 08540-3674		
Country US	Telephone 609-924-8555		Fax 609-924-3036		
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Dave		Family Name Ladouceur or Surname			
Inventor's Signature 				Date 10/29/2001	
Residence: City Boulder	State CO	Country United States	Citizenship US		
Mailing Address 4584 Robinson Place					
Mailing Address					
City Boulder	State CO	ZIP 80301	Country United States		
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Scott		Family Name Schorer or Surname			
Inventor's Signature 				Date	
Residence: City Lafayette	State CO	Country United States	Citizenship US		
Mailing Address 2609 Ravenwood Lane					
Mailing Address					
City Lafayette	State CO	ZIP 80026	Country United States		
<input checked="" type="checkbox"/> Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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Name	David P. Krivoshik				
Address	Mathews, Collins, Shepherd & Gould, P.A.				
Address	100 Thanet Circle, Suite 306				
City			State	ZIP	
Princeton			NJ	08540-3874	
Country	Telephone			Fax	
US	609-924-8555			609-924-3036	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Dave		Family Name Ladouceur or Surname		
Inventor's Signature		Date		
Residence: City		State	Country	Citizenship
Boulder		CO	United States	US
Mailing Address 4584 Robinson Place				
Mailing Address				
City		State	ZIP	Country
Boulder		CO	80301	United States
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name Scott		Family Name Schorer or Surname		
Inventor's Signature		Date 11/29/01		
Residence: City		State	Country	Citizenship
Lafayette		CO	United States	US
Mailing Address 2509 Ravenwood Lane				
Mailing Address				
City		State	ZIP	Country
Lafayette		CO	80026	United States
<input checked="" type="checkbox"/> Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				

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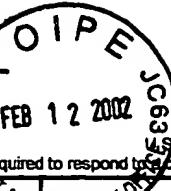
**ADDITIONAL INVENTOR(S)  
Supplemental Sheet**

Page 3 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Gregg		Lauer				
Inventor's Signature		Date				
Residence: City	Boulder	State	CO	Country	United States	Citizenship
Mailing Address	2885 Lagrange Circle					
Mailing Address						
City	Boulder	State	CO	ZIP	80303	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Todd		Hoven				
Inventor's Signature		Date				
Residence: City	Ft. Collins	State	CO	Country	United States	Citizenship
Mailing Address	1509 Elm Street					
Mailing Address						
City	Ft. Collins	State	CO	Zip	80521	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname				
Bruce		Bacon				
Inventor's Signature		Date				
Residence: City	Littleton	State	CO	Country	United States	Citizenship
Mailing Address	9623 Sagebrush Trail					
Mailing Address						
City	Littleton	State	CO	Zip	80124	Country

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Todd  
Hoven

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**DECLARATION**

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 3 of 4

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Gregg		Lauer		
Inventor's Signature		Date		
Residence: City	Boulder	State	CO	Country
United States Citizenship US				
Mailing Address 2885 Lagrange Circle				
Mailing Address				
City	Boulder	State	CO	ZIP 80303 Country United States
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Todd		Hoven		
Inventor's Signature		Date 10-22-01		
Residence: City	Ft. Collins	State	CO	Country United States Citizenship United States
Mailing Address 1509 Elm Street				
Mailing Address				
City	Ft. Collins	State	CO	Zip 80521 Country United States
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Bruce		Bacon		
Inventor's Signature		Date		
Residence: City	Littleton	State	CO	Country United States Citizenship US
Mailing Address 9623 Sagebrush Trail				
Mailing Address				
City	Littleton	State	CO	Zip 80124 Country United States

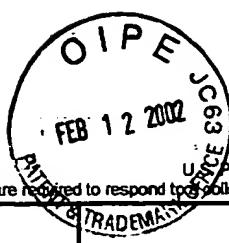
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Inventor's Signature		Date			
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Bruce		Bacon			
Inventor's Signature 		Date 10/25/01			
Residence: City	Littleton	State	CO	Country	United States
				Citizenship US	
Mailing Address 9623 Sagebrush Trail					
Mailing Address					
City	Littleton	State	CO	Zip	80124 Country United States

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Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname		
Mike	Shell			
Inventor's Signature	Date 10/31/01			
Residence: City	Boulder	State	CO	
		Country	United States	
Citizenship	US			
Mailing Address	46 Anemone Lane			
Mailing Address				
City	Boulder	State	CO	ZIP 80302
			Country	United States
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname		
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Mailing Address				
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